



September 15, 2016

VIA IN IURC Online Docketing

Telecommunications Division
Indiana Utility Regulatory Commission
101 West Washington Street
Suite 1500 East
Indianapolis, IN 46204
317-232-2701

Re: ICIM Corporation
Original Application VoIP Certificate of Territorial Authority

Dear Sir/Madam:

Enclosed please find an original application for Issuance of a Certificate of Territorial Authority to Provide VoIP within the State of Indiana on behalf of ICIM.

Please contact me if you have any questions or if I may provide you with any additional information.

Respectfully submitted,

Beth Brandenstein
Regulatory Affairs
GSAssociates
678-203-0276

Enclosures



**APPLICATION FOR A CERTIFICATE OF TERRITORIAL AUTHORITY FOR
COMMUNICATIONS SERVICE PROVIDERS**
State Form 52648 (R5 / 8-11)
INDIANA UTILITY REGULATORY COMMISSION

FILED
SEP 19 2016
**INDIANA UTILITY
REGULATORY COMMISSION**

Applicants are required to file an original and five (5) paper copies.

Cause No. 44854 (IURC use only)

PURSUANT TO IC 8-1-32.5-4, A COMMUNICATIONS SERVICE PROVIDER ("CSP") MEANS A PERSON OR ENTITY THAT OFFERS COMMUNICATIONS SERVICE TO CUSTOMERS IN INDIANA, WITHOUT REGARD TO THE TECHNOLOGY OR MEDIUM USED BY THE PERSON OR ENTITY TO PROVIDE THE COMMUNICATIONS SERVICE. THE TERM INCLUDES A PROVIDER OF COMMERCIAL MOBILE RADIO SERVICE (AS DEFINED IN 47 U.S.C. 332).

List each type of Communications Service which applicant proposes to offer in Indiana:

☒ **TELECOMMUNICATIONS SERVICE AS DEFINED IN 47 U.S.C. 153(46)**

VoIP (Interconnected VoIP service as an IP enabled retail service considered as IP enabled retail service sold as telecommunications service.)

Please list each type of service, such as facilities-based local exchange; bundled resale of local exchange; commercial mobile radio service; interexchange; operator services or other.

☐ **INFORMATION SERVICE AS DEFINED IN 153(20), WITHOUT REGARD TO THE TECHNOLOGY OR MEDIUM USED TO PROVIDE THE COMMUNICATIONS SERVICE.**

Please list each type of service, such as internet protocol enabled services; broadband service; advanced service (as defined in 47 CFR 51.5); or other.

☐ **VIDEO SERVICE AS DEFINED IN IC 8-1-34-14 (Note: A Video Service Provider which does not currently have a video franchise (local or state) for the service area described above must obtain a state issued video franchise as specified in IC 8-1-34-16)**

Please list any service areas in Indiana where Applicant offers service under a local franchise.

PURSUANT TO I.C. 8-1-32.5-6(e), A CSP THAT IS ONLY OFFERING A SERVICE(S) DESCRIBED IN I.C. 8-1-2.6-1.1 IS ONLY REQUIRED TO REPORT AND CERTIFY THE ACCURACY OF SOME OF THE INFORMATION REQUESTED IN THIS FORM. NOT ALL PORTIONS OF THE FORM ARE APPLICABLE TO SUCH A CSP. *SEE PAGE 2 FOR INSTRUCTIONS.

The following services are "described in I.C. 8-1-2.6-1.1":

- (1) advanced services (as defined in 47 CFR 51.5);
- (2) broadband service, however defined or classified by the Federal Communications Commission;
- (3) information service (as defined in 47 U.S.C. 153(20));
- (4) Internet Protocol enabled retail services:
 - (A) regardless of how the service is classified by the Federal Communications Commission;and
 - (B) except as expressly permitted under I.C. 8-1-2.8;
- (5) commercial mobile service (as defined in 47 U.S.C. 332); or
- (6) any service not commercially available on March 28, 2006.

In Indiana, will Applicant **ONLY** offer services described in I.C. 8-1-2.6-1.1?

Check one: ☒ YES ☐ NO

Please list the specific services, as described in I.C. 8-1-2.6-1.1, the Applicant proposes to offer:
Interconnected VoIP service as an IP enabled retail service considered as IP enabled retail service sold as
telecommunication service.

PLEASE NOTE: All CSPs *must* complete a Verified Notice of Change form if the answer to this question changes at any time subsequent to completing this application form. The Notice of Change form is currently available on the Commission's website: www.in.gov/iurc.

***INSTRUCTIONS for providers offering ONLY a service(s) described in I.C. 8-1-2.6-1.1:**

You **DO NOT** have to complete the following sections:

- Part II •Part IV.2.a •Part IV.2.b
- Some portions of Part VI may also not apply.

The following sections **are required**, unless otherwise noted:

- Part I.A •Part I.D •Part IV.1
- Part I.B •Part I.E. •Part IV.3
- Part I.C •Part III •Part V
- Selected portions of Part VI

I. APPLICANT CONTACT INFORMATION

A. Legal Name of Company: ICIM Corporation

B. Name(s) under which the company will be marketing services in Indiana:
(Company names, including any "doing business as" names, must be registered with Indiana Secretary of State)

C. Company Address:
118 East Main Street, Suite 100,
Louisville KY 40202

Main Telephone Number: 888-955-5155
E-mail Address: bbarbour@voitress.com
Website Address: www.hellospoke.com

FAX Number: _____

D. Name, title, and other contact information of company's contact person for ongoing communications with the commission (including regulatory affairs and/or customer service information):

Name and Title Beth Brandenstein
Telephone Number: 678-203-0276 FAX Number: 678-999-4928
Mailing Address: 1595 Peachtree Parkway, Ste. 204-337, Cumming GA 30041
Email Address: beth@gsaudits.com

E. Name, title, and other contact information of attorney or contact person for this application, if different from D. above:

Name and Title same
Telephone Number: _____ FAX Number: _____
Mailing Address: _____
E-mail Address: _____

F. Parent Company's Legal Name, Address, and Telephone Number (if applicable):

(CSPs that will only offer a service(s) described in I.C. 8-1-2.6-1.1 are not required to provide their parent company information.)

II. Service Information

(Add additional sheets if necessary.)

A. Please describe the geographic area(s) for which the applicant seeks authority.

B. Please provide a description of each service area in Indiana in which the applicant initially proposes to offer communications service (i.e., county, city, or rate center). If the applicant is proposing to offer Video Service, will the service be authorized through a State or local franchise? If the applicant is a Video Service provider authorized through a local franchise authority, please provide the issuing franchise authority and expiration date.

C. Please provide a description of each type of communications service that the provider proposes to offer in each of the service areas identified in II B. above. The services listed should be consistent with the services marked at the top of Page 1.

D. For each type of service identified in C, please list whether the communications service will be offered only to residential customers, only to business customers or to both residential and business customers.

E. Please provide an estimated date of deployment (year and quarter) for each service area and each service type within that area for which the applicant seeks authority. The services listed should be consistent with the services marked at the top of Page 1.

F. Will applicant offer stand alone basic telecommunications service for a flat monthly rate pursuant to I.C. 8-1-2.6-0.1?

G. Does the applicant seek authorization to provide facilities-based local exchange? _____

H. Does the applicant seek authorization to offer interexchange services only? _____

I. Is applicant offering wholesale communications services, retail communications services, or both? _____

J. Will the applicant operate as a Local Cooperative Corporation pursuant to I.C. 8-1-17-3?

If yes, please submit three (3) original articles of incorporation as required by I.C. 8-1-17-5 et seq.¹

¹ The Commission is required to provide notice of CTA applications of local cooperative corporations to each facilities-based local exchange carrier operating in territory contiguous to the area in which the cooperative corporation proposes to render telephone service pursuant to IC 8-1-17-5(d).

K. Please list other states in which applicant is authorized to provide communications services and the types of services offered.

III. Additional Requirements²

Applicant further represents that it will:

- Comply with Indiana law (including but not limited to Title 8 of the Indiana Code) and IURC regulations (170 IAC 7) and applicable current and future Orders of the IURC.³
- Notify the Commission of any change in the legal name, address, control or status of the CTA, or service area (if applicable), pursuant to I.C. 8-1-32.5-12, using the CSP Notice of Change Form prescribed by the Commission. Such notification of change shall be provided to the Commission thirty (30) days prior to the occurrence of the change.
- Upon request, provide any other information the Commission is authorized to collect from a communications service provider under state or federal law pursuant to I.C. 8-1-2.6-13-9(E).
- Applicant represents that it will, at the time requested by the Commission, provide an annual report concerning communications services offered in each service area (county and ZIP code) in Indiana as required by I.C. 8-1-2.6-13(d)(9)(C) **Note:** This does not apply to CMRS providers.
- If applicable, file intrastate access tariffs, concurrences, and exceptions pursuant to the Commission's filing procedures and provide informational copies of interstate access tariffs.
- If applicable, provide the Commission with current and updated/corrected hyperlinks to the company's intrastate and interstate access tariffs, concurrences, and exceptions, consistent with the IURC's General Administrative Order (GAO) 1998-2.

IV. Attachments

The following information must be included with this application:

1. A copy of the Applicant's Certificate of Authority from the Indiana Secretary of State, authorizing the applicant to do business within the State of Indiana. (A tax statement or other documentation from the Indiana Department of Revenue is **not acceptable**.)
 - a. Applicants that are units of a municipal government, or are owned by a municipal government entity, may submit their local authorizing ordinance in lieu of the Secretary of State Certificate of Authority.
2. Information demonstrating the financial, managerial and technical ability to provide each communication service identified in the application.
 - a. The applicant's most recent financial statement or balance sheet or that of the parent company if separate Indiana operations have not yet been established. Applicants that are municipalities may submit their local budget.
 - b. Biographies of the applicant's corporate officers responsible for Indiana indicating managerial and technical qualifications.
(Attachment 2a and 2b are not required for CSPs that will "only offer a service(s) described in IC 8-1-2.6-1.1.")
3. A statement signed under penalty of perjury by an officer or another person authorized to bind the applicant (see attached affidavit).

Although an evidentiary hearing before the Commission is not required, the Commission shall hold an evidentiary hearing, if one is requested pursuant to IC 8-1-32.5-9(a). Any hearing shall follow the statutory provisions of IC 8-1-32.5-9(b).⁴

² Part III applies to all communications service providers, unless explicitly exempted pursuant to Indiana law and as otherwise noted herein.

³ Telecommunications Service Providers and Video Service Providers are subject to enforcement remedies for prohibited actions pursuant to IC 8-1-29.5.

⁴ The FCC determines market entry of CMRS providers pursuant to 47 CFR Chapter 1 Part 13.

V. Application Verification

I affirm under the penalties of perjury that the above representations made in this application are true.
(Must be signed by an officer of the company.)

W. Barber 9/9/16
Signature and Date (month, day, year)

Bo Barbour, Controller
Name and Title (printed or typed)

AFFIDAVIT⁵

I, Bo Barbour (print name), as an authorized corporate officer or person authorized to bind ICIM Corporation (company name), affirm under penalty of perjury that:

a) the applicant has filed or will timely file with the Federal Communications Commission ("FCC") all forms required by the FCC;

b) the applicant agrees to comply with customer notification requirements of the Commission pursuant to I.C. 8-1-32.5-6(b)(3)(B) and 8-1-32.5-11(b) (not applicable to CMRS providers per I.C. 8-1-32.5-11(b));

c) the applicant (including CMRS providers⁶) agrees to update the information provided in the application on a regular basis pursuant to I.C. 8-1-32.5-12;

d) the applicant agrees to notify the Commission when the applicant commences offering communications service in each service area identified in the application (Pursuant to I.C. 8-1-32.5-6(e), this requirement is not applicable to CSPs that only offer a service(s) described in I.C. 8-1-2.6-1.1.);

e) the applicant agrees to pay any lawful rate or charge for switched and special access services, as required under any:

- applicable interconnection agreement; or
- lawful tariff or order approved or issued by a regulatory body having jurisdiction.

f) the applicant agrees to report, at the time requested by the Commission, information required under I.C. 8-1-2.6-13(d)(9) et seq. (This requirement is not applicable to CMRS providers, per I.C. 8-1-2.6-13(d)(9).); and

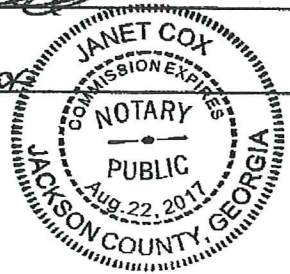
g) applicant further represents that it will provide an annual report concerning communications services offered in each service area (county, ZIP code and census tract) in Indiana as required by I.C. 8-1-2.6-13(d)(9)(C). (Not applicable to CMRS providers, per I.C. 8-1-2.6-13(d)(9).)

W. Barbour
Signature
Controller

Title 9/9/2016
Date (month, day, year)

Subscribed and Sworn to before me, a Notary Public, this 9th day of September, A.D. 2016

Janet Cox
Signature
Janet Cox
Printed Name



My Commission Expires: 8/22/2017
My County of Residence: Jackson

⁵See IC 8-1-32.5-6(b)(3).

⁶There is an exception in IC 8-1-32.5-12-6 to the information that CMRS providers must provide. This exception does not apply to the other subsections in IC 8-1-32.5-12.

STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF AUTHORITY

I, SUE ANNE GILROY, Secretary of State of Indiana, hereby certify that the Application for Certificate of Authority to do business in the State of Indiana of the following corporation in the form prescribed by my office has been presented to me at my office, accompanied by the fees together with a Certificate of Existence of the corporation, as prescribed by the provisions of the Indiana Business Corporation Law, as amended.

I further certify that:

The name under which the corporation is to transact business in the State of Indiana, is

ICIM CORPORATION


The corporation is incorporated under the laws of the State of Kentucky

The name and address of its resident agent in Indiana for service of legal process is

David L. Durik
137 E. Main St. New Albany 471500000

WHEREFORE, I hereby issue to such corporation this Certificate of Authority, and I further certify that it shall have authority to transact business in the State of Indiana effective on January 23, 1996, subject to the terms and conditions prescribed by the Indiana Business Corporation Law, as amended.

In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Twenty-third day of January, 1996.



Deputy



INFORM. DOC. #5073.

APPLICATION FOR CERTIFICATE OF
AUTHORITY OF A FOREIGN CORPORATIONState Form 36784 (MS / 2-82) Corporate Form 112
Approved By State Board Of Accounts 1987

1996020117

- INSTRUCTIONS: 1. Use an 8 1/2" x 11" paper for inserts.
2. Present 2 originally executed copies to:

Secretary of State
Corporations Division
302 W. Washington Street, Room E018
Indianapolis, Indiana 46204
(317) 232-6576

3. FILING FEE- \$90.00

4. This application cannot be accepted without an original certificate of existence duly authenticated by the proper authority from corporation's domiciliary state within the last sixty (60) days. I.C. 29-1-49-1 et seq.
5. This application cannot be accepted unless a registered agent with an Indiana street address is listed in ARTICLE II. I.C. 29-1-49-9

APPLICATION FOR CERTIFICATE OF AUTHORITY
OF

ILIM Corporation

A FOREIGN CORPORATION
TO TRANSACT BUSINESS IN THE STATE OF INDIANA

The undersigned officer of the above Kentucky (State of Domicile)
corporation which was formed as:

☒ A general business corporation☐ A professional corporation

desiring to effectuate the admittance of the Corporation to transact business in the State of Indiana, certifies the following facts:

Name of Corporation (Must be identical to name shown in Articles of Incorporation and Amendments thereto)

ILIM Corporation

Name of the registered agent of the corporation

David L. Durik

Indiana address of the registered office of corporation (Number and street, city, state and Zip code)

137 East Main Street, New Albany IN 47050

Address of the principal office of corporation (Number and street, city, state and ZIP code)

Date of Incorporation in domiciliary state:

11/15/89

Expected period of duration listed in the Articles Of Incorporation

The names and business addresses of the officers of the Corporation:

Name	Title	Address (Number, street, city, state and ZIP code)
Boddy L. Richardson	President	137 East Main St. New Albany IN 47150
David L. Durik	Vice President	137 East Main St. New Albany IN 47150

The names and business addresses of the Board of Directors of the Corporation are as follows:

Name	Address (Number, street, city, state and ZIP code)
Reddy L. Richardson	137 East Main St. New Albany IN 47150
David L. Durik	137 East Main St. New Albany IN 47150

In witness whereof, the undersigned being the Vice President of said corporation executes this
(Signature)

Application For Certificate Of Authority, and verifies subject to penalties of perjury, that the facts contained herein are true this

10th day of January, 1996

Signature



Printed name

David L. Durik

IN THE NAME AND BY THE AUTHORITY OF THE



OFFICE OF THE SECRETARY OF STATE

DOMESTIC CORPORATION
CERTIFICATE OF EXISTENCE

I, JOHN Y. BROWN III, Secretary of State of the Commonwealth of Kentucky, do hereby
certify that according to the records in the Office of the Secretary of State,

ICIM CORPORATION

is a corporation duly organized and existing under the laws of the Commonwealth of Kentucky,
whose date of incorporation is NOVEMBER 15, 1989;
and whose period of duration is PERPETUAL.

I further certify that all fees and penalties owed to the Secretary of State have been paid
to date; that Articles of Dissolution have not been filed; and that the most recent annual report
required by KRS Chapter 271B.16-220 or 273.3671 has been delivered to the Secretary of
State on behalf of said corporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal, at
Frankfort, Kentucky, this 16TH day of JANUARY, 19 96.


JOHN Y. BROWN III
Secretary of State
Commonwealth of Kentucky

LVB